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Practitioner's Docket No. 701039-051500-C

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Snyder, E., et al. Group No.: Not yet assigned
Application No.: 09/939,476 Examiner: Not yet assigned
Filed: 08/23/01
For: ENGRAFTABLE NEURAL PROGENITOR AND STEM CELLS FOR BRAIN
TUMOR THERAPY

Assistant Commissioner for Patents
Washington, D.C. 20231

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8(a) and 1.10)

I hereby certify that this correspondence:

1. Preliminary Amendment Transmittal [3 pgs];
2. Preliminary Amendment with Marked Changes [7 pgs];
3. Return Receipt Postcard;

is on the date shown below being:

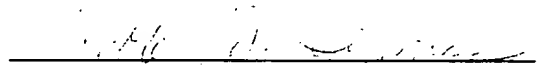
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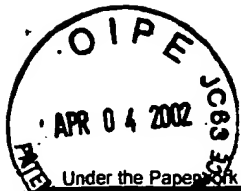
Date: January 31, 2002

FACSIMILE

transmitted by facsimile to the Patent
Trademark Office.


Signature

Nicole M. Gignac
(type or print name of person certifying)



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PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 65.00

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | 09/939,476 |
| Filing Date | August 23, 2001 |
| First Named Inventor | Evan Y. Snyder |
| Examiner Name | To be assigned |
| Group Art Unit | 1636 |
| Attorney Docket No. | 701039-051500-C |

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account Charge fee deficiencies

Deposit
Account
Number
Deposit
Account
Name

50-0850

NIXON PEABODY LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 101 | 740 | 201 | 370 | Utility filing fee | |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims Fee from below Fee Paid
Total Claims -20** = ☐ X ☐ = ☐
Independent Claims -3** = ☐ X ☐ = ☐
Multiple Dependent ☐ = ☐

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|--|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | 65.00 |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

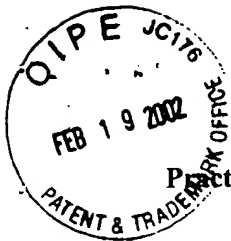
SUBTOTAL (3) (\$) 65.00

SUBMITTED BY

| | | | | | |
|-------------------|------------------|-----------------------------------|---------|-----------|----------------|
| Name (Print/Type) | David S. Resnick | Registration No. (Attorney/Agent) | 34, 235 | Telephone | (617) 345-6057 |
| Signature | | Date | 3/26/02 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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X6
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In re application of: Snyder, E., et al. Group No.: Not yet assigned
Application No.: 09/939,476 Examiner: Not yet assigned
Filed: 08/23/01
For: ENGRAFTABLE NEURAL PROGENITOR AND STEM CELLS
FOR BRAIN TUMOR THERAPY

CERTIFICATE OF MAILING (37 C.F.R. SECTION 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

January 31, 2002
Date

Nicole M. Gignac
(type or print name of person mailing paper)

[Signature]
Signature of person mailing paper

Assistant Commissioner for Patents
Washington, D.C. 20231

PRELIMINARY AMENDMENT TRANSMITTAL

1. Transmitted herewith is a preliminary amendment for this application.

STATUS

2. Applicant asserts Small Entity status pursuant to (37 C.F.R. 172).

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. Section 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. Section 1.136 (fees: 37 C.F.R. Section 1.17(a)(1)-(4)) for the total number of months checked below:

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| | Extension (months) | Fee for other than <u>small entity</u> | Fee for <u>small entity</u> |
|--------------------------|-----------------------|---|--------------------------------|
| <input type="checkbox"/> | one month | \$ 110.00 | \$ 55.00 |
| <input type="checkbox"/> | two months | \$ 390.00 | \$ 195.00 |
| <input type="checkbox"/> | three months | \$ 890.00 | \$ 445.00 |
| <input type="checkbox"/> | four months | \$ 1,390.00 | \$ 695.00 |

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured. The fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. Section 1.16(b)-(d)) has been calculated as shown below:

| Claims Remaining After <u>Amendment</u> | Highest No. Previously <u>Paid For</u> | Present <u>Extra</u> | Rate | Addit. <u>Fee</u> | <u>OR</u> | Other Than A <u>Small Entity</u> | Addit. <u>Fee</u> |
|---|--|-------------------------|----------|------------------------|-----------|-------------------------------------|---------------------------------|
| Total: 7 | Minus 15 | = 0 | x \$9 = | 0 | | x \$18 = | \$ |
| Indep.: 2 | Minus 3 | = 0 | x \$40 = | 0 | | x \$80 = | \$ |
| <input type="checkbox"/> First Presentation of Multiple Dependent Claim | | | | + \$135 | | +270 = | \$ |
| Total | | | | <u>Addit. Fee</u> = \$ | 0.00 | <u>OR</u> | Total <u>Addit. Fee</u> = \$ |

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(complete (c) or (d), as applicable)

(c) ☒ No additional fee for claims is required.

OR

(d) ☐ Total additional fee for claims required \$ _____.

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$ _____.
☐ Charge Account No. _____ the sum of \$ _____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 50-0850.

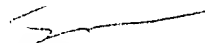
AND/OR

☒ If any additional fee for claims is required, charge Account No. 50-0850.

Date: January 31, 2002

Respectfully submitted,

Customer No.: 26770



David S. Resnick (Reg. No. 34,235)
Lana A. Shvartsman (Reg. No. 48,502)
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Boston, MA 02110
Tel: (617) 345-6057

91B 588
6/16/02
PATENT

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Nicole M. Gignac
(type or print name of person mailing paper)

Signature of person mailing paper

Assistant Commissioner for Patents
Washington, D.C. 20231

PRELIMINARY AMENDMENT

Sir:

Please amend the application as follows:

IN THE SPECIFICATION:

On page 6, please replace the second paragraph, beginning at line 13, with the following paragraph:

Figures 4A, 4B, 4C, 4D, 4E, 4F and 4G illustrate neural progenitor/stem cells implanted at distant site from main tumor bed migrating throughout normal tissue target CNS-1 tumor cells; (Figs. 4A, 4B) same hemisphere: 3×10^4 CNS-1 tumor cells implanted into right frontal lobe. On day 6, 4×10^4 C17.2 cells injected into right frontoparietal lobe (4mm caudal tumor injection). Animals sacrificed on day 12 (shown) and day 21, C17.2 cells seen in tumor bed (Xgal and neutral red). (Figs. 4C, 4D, 4E) Contralateral hemisphere: 3×10^4 CNS-1 tumor cells implanted into left frontal lobe and 5×10^4 CNS-1 tumor cells implanted into left frontoparietal lobe. On day 6, 8×10^4 C17.2 cells were injected into right